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7 CT CT CT CT	ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH Registered No.
Í	County Ila State arizona
ž	/District or Township or Village
į /	City Man No. 1145 Sullivan St. 81
i, '	2. Full name of child
	Jewale births. To be answered ONLY 4. Twin, triplet or other 6. Legitimate? 7. Date of birth births. 7. Date of birth births.
•	S. FATHER A 14. MOTHER
:	Full name Coteban James Pull maiden name Balbanera Urbana
j ∵ p i	9. Residence (Usual place of abode) (Usual place of abode) (Usual place of abode) (Usual place of abode)
stati	If non-resident, give place and state. If non-resident, give place and state.
blrch	10. Color or race
ö	Met. 11. Age at last birthday 47 (Years) West. 17. Age at last birthday 38 (Years)
order	12. Birthplace (city or place) Sonora,
.	(State or country) / Wey.
	13. Occupation 19. Occupation
	Nature of industry Nature of industry
مريرا	20. Number of children of this mother. (a) Born slive and now living 9 21, Were precautions taken against oph- thalmia neonatorum? (b) Born slive and now living 9 1, Were precautions taken against oph- thalmia neonatorum?
ŀ	(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead 3 that neonatorum? (c) Stillborn
<i>i</i>	CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
	I hereby certify that I attended the birth of this child, who was bounded at 2 m. on the date above stated (Borp, alive or stillbyin.)
	* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
	Given name added from Physician or midule).
,	a supplemental report Month, day, year Address Manu, Uryour
/	Filed Jan 8 128 Co. E. Joseph
\	Registrar Registrar
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